| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 / 0804887 | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------|--------------------------|------------|----------------------------------------|----------|-----------|-------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | LENTITY | | OTHE | -/ R THAN |
| TOTAL CLAIMS | \?_ | | | TYPE | E FEE | ∵T | RATE | ENTITY |
| FOR NUMBER | | LED . NU | MBER EXTRA | BASIC | | | | |
| TOTAL CHARGEABLE CLAIMS 7 | | s 20= •· | 0 | X3.8 | _ | \dashv | | |
| INDEPENDENT CLAIMS | 7 imini | minus 3 = | | Х43а | | -JOF | <u>'</u> | |
| MULTIPLE DEPENDENT CLAIM | | . 🗖 | | | | X86= | | |
| * If the difference in column 1 is less than zero, enter *0" in column 2 | | | | +145 | | ÖF | +290= | |
| CLAIMS AS AMENDED - PART II | | | | | ــــــــــــــــــــــــــــــــــــــ | OR | | 770 |
| 7-3-06 (Catumn 1 | · SMAL | L ENTITY | OR | OTHER | | | | |
| CLAIMS REMAINING AFTER AMENDMEN Total Independent 3 | | HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | RATE | ADDI- TIONA FEE | • | RATE | ADDI/ TIONAL PEE |
| Total • 13 | Minus | - 20 | • — | X\$ 9- | | OR | X\$18= | |
| Independent • 3 | | 3 | . — | X43= | | OR | X86=/ | 7 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | +145= | + | | +290= | \ |
| | | | | TOT/ | | OR | TOTAL | - |
| ADDIT. FEE OR ADDIT. FEE COlumn 2) (Column 3) | | | | | | | | |
| CLAIMS REMAINING AFTER AMENOMENT Total Independent Independent | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Total • | Minus | | • | X\$ 9= | | OR | X\$18= | |
| Independent • FIRST PRESENTATION OF M | | 001501 | 1 | X43= | • | OR | X86= | |
| · | OLIPLE DEPEN | DENT CLAIM | | +145= | | OR | +290= | , i |
| | • | | | TOTAL | | | TOTAL | |
| (Column 1) | (| Column 2) | (Column 3) | ADDIT, FEE | | | DOTT.FEEL | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Total | P | NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Total • | Minus | | - | X\$ 9= | | | X\$18= | TEE |
| independent • | Minus •• | - | • | X43= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | OR | | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." All the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." All the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." All the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." | | | | | | OR _ | +290= | • • |
| The "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." ADDIT. FEE | | | | | | | | |

Application or Docket Number